



# City of Umatilla

"NATURE'S HOMETOWN"

## Public Records Request Form

Date of Request: \_\_\_\_\_

Record(s)  
Requested: \_\_\_\_\_

**Please select method you wish to use for record retrieval:**

*Be advised that the requestor has the right to complete anonymity when requesting a public record.  
The "pick up" option is the only method that will not create an additional public record.*

Pick Up       Mail       Email

*Should anonymity be desired by the requestor, submit this form by submitting the information above. Staff will assign a request number, and provide a copy to the requestor. The requestor will use this number when contacting the city to retrieve the record.*

**Our office charges the following for paper copies of Public Records, as allowed by Florida Statute:**

### Florida Statutes Chapter 119.07 Inspection and copying of records

(4) The custodian of public records shall furnish a copy or a certified copy of the record upon payment of the fee prescribed by law. If a fee is not prescribed by law, the following fees are authorized:

(a)1. Up to 15 cents per one-sided copy for duplicated copies of not more than 14 inches by 8 1/2 inches;

3(d) If the nature or volume of public records requested to be inspected or copied pursuant to this subsection is such as to require extensive use of information technology resources or extensive clerical or supervisory assistance by personnel of the agency involved, or both, the agency may charge, in addition to the actual cost of duplication, a special service charge, which shall be reasonable and shall be based on the cost incurred for such extensive use of information technology resources or the labor cost of the personnel providing the service that is actually incurred by the agency or attributable to the agency for the clerical and supervisory assistance required, or both.

***There may be a charge for a records request requiring significant research (more than 30 minutes of staff time). The Records Custodian will calculate the approximate cost and a deposit will be required prior to the request being fulfilled.***

For Office Use Only:

Date Request Received: \_\_\_\_\_ Staff Member Taking Request: \_\_\_\_\_

Request Number assigned: \_\_\_\_\_ Date Request given to City Clerk: \_\_\_\_\_

Date Request Filled: \_\_\_\_\_ Date Request Picked Up: \_\_\_\_\_